

12 Cornfield Lane, Enfield CT 06082

September 3, 2009

Honorable Chairs and Members of the Committees:

I am Martha Roy from Enfield.

As Conservator of Person and Estate to my brother, Howard Cook, thank you for this opportunity to speak on behalf of the effort to keep Cedarcrest Hospital and other DMHAS facilities and services intact without change other than to enhance treatment.

In earlier testimony to the Appropriations Committee, I talked about Howard's life with seven different mental health diagnoses, as well as mild mental retardation. The struggles we went through to get him adequate care and treatment were numerous. In brief, since my parents managed to keep him out of harm's way, help was virtually non-existent even though a regional treatment center refused to allow him participation in their own clinical and social programs due to his behavior. It took him being barred from four nursing homes, then spending 11 days in an Emergency Department, before a bed at Cedarcrest was offered.

In three and one-half years Howard has come a long way, but his diseases will never allow him to live in any kind of a setting that is less than 24/7 professional support.

The Appropriations Committee listened, and Members' expressed willingness and desire to learn more. In-depth on-site visits to facilities, as well as other research, ensued. The conclusion was that Cedarcrest and High Meadow should remain open and there should be NO client fallout as a result of shuffling of DMAS services. If anything, services should be stronger.

Today, we are confronted with the probability of moving absolutely backwards in our treatment of mentally ill people in general, and those in residential settings with severe diseases in particular. Others will speak to the numbers--my concern today is how those numbers will affect Howard and others like him -- but it is obvious to me that there will be folks who will be sent into inappropriate community settings without much regard for their treatment needs should the budget remain as last proposed.

So, I reiterate my expectation of every single Legislator who thinks that the proposals to close Cedarcrest and High Meadows, is a good idea: Every client moved to an inadequate community setting can receive a list of Legislator's phone numbers upon discharge. When their illness causes an unintentional yet very real danger to themselves or others, they can call whatever Legislator is "on call" that time since there won't be anywhere you can tell them to go for respite.

Rather than dealing with social workers, doctors and support staff who are superb at what they do, you will get to work with police officers and prison officials and lawyers with little or no professional knowledge of mental illness. Good Luck explaining to the clients that they're going to end up in jail only because they're sick. It will be the only place for them to go. Imagine saying the same thing to a diabetic.

Having been around people with mental illness for my entire life, to me there's really no decision involved with keeping and enhancing services. It is my fervent hope that you feel the same way. However, if the State of Connecticut thinks it's okay to put mentally ill people and communities in general at risk through implementing this budget by closing residential facilities for mental illness, there is little hope for the humanity of the State.

Again, thank you. I'll be glad to provide any further information if requested.